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Marshland Rural District Council



1958

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

District Council Offices
Alexandra Road,
Wisbech.

J. A. SLATTERY,
M.R.C.S., L.R.C.P., D.P.H.

MARSHLAND RURAL DISTRICT COUNCIL

MEMBERS OF THE PUBLIC HEALTH COMMITTEE:-

The Chairman (Councillor W. Allen) The Vice Chairman (Councillor C. Sutton) and the full Council.

Public Health Officers of the Local Authority:-

Medical Officer of Health -

J.A. Slattery, M.R.C.S., L.R.C.P., D.P.H.
Local Health Office,
Downham Market.

Telephone:- Downham Market 3241.

also holds appointments of:-

Assistant County Medical Officer of Health.
School Medical Officer.
Medical Officer of Health Downham Market Urban District Council.
Medical Officer of Health Downham Rural District Council.

Senior Public Health Inspector and Surveyor -

B.V. Braybrook, C.R.S.H.

Additional Public Health Inspector and Deputy Surveyor -

A. Nunn, C.R.S.H.

Local Health Office,
Downham Market.

September, 1959

TO THE CHAIRMAN AND MEMBERS OF THE MARSHLAND
RURAL DISTRICT COUNCIL.

Mr. Chairman and Gentlemen,

I have the honour to present my report for the year ending December 31st, 1958.

The estimated mid-year population was 16,710.

Births - There were 287 live births giving a birth rate of 17.5.

185 births occurred at home and 102 in hospital. 3 deliveries took place in caravans. Rather more than 60% of deliveries occur in Marshland homes. This figure is similar to that for Norfolk as a whole.

Deaths - There were 166 deaths giving a death rate of 11.2.

4 deaths occurred between the age of 1 and 25 years. 1 was a road accident and the other 3 were caused by chronic illness. There were 4 other fatal road accidents during the year.

Infectious disease

Measles - Only 3 cases were notified during the year. This does not necessarily mean the health of the community has been good but that the number of susceptible people was too small to allow an outbreak of measles to develop. The virus of measles depends for its existence on rapid spread from one susceptible person to another. It does not affect animals and cannot live in harmony with man. For these reasons we believe measles has only arisen since man adopted a community life. There is at present no practicable way of controlling its spread, but this may not always be the case. We know measles is spread by droplets coughed from infected people but recent work suggests that virus from these droplets gain entry to the tissues of susceptible people through the eye and not the throat as we have hitherto believed. Susceptible children have been given temporary protection by wearing goggles and by the instillation of anti-measles serum in their eyes. Experimental work such as this may lead to methods for giving temporary protection to children who are about to take examinations or set forth on family holidays. What a blessing this might be to both child and parent!

Whooping Cough - Eleven cases were notified during the year. This disease is generally not serious but can be very worrying when it attacks babies. Immunisation against whooping cough gives a good measure of protection and most doctors advise it.

Tuberculosis - Two of the registered deaths were due to tuberculosis of the lungs.

Seven new cases were notified during the year, two of them being affections of the abdominal organs. We believe that most cases of abdominal disease are caused by drinking tuberculous milk.

Prevention of Infectious Disease.

Diphtheria - 170 primary courses of injection were begun during the year and since completed. 109 children were given booster injections. Immunisation is the only effective way of preventing diphtheria and every healthy baby should be immunised before he is a year old.

It is generally held that 70% of children in any age group need to be immune to the disease if we are to remain free from diphtheria. Outbreaks still occur in boarding schools. This underlines the importance of maintaining immunity by giving booster injections to school children, particularly those who go away to school.

Tetanus

Preventive inoculation against tetanus is now accepted practice. During the year 78 courses of injection were given, all save 13 being combined with diphtheria immunisation.

Inoculations can be obtained at those welfare clinics attended by a doctor and also at the annual school medical inspections. When combined with diphtheria immunisation it is best given during the winter months. Not only does inoculation prevent tetanus but it obviates the need to give anti-tetanus serum to injured people. Serum cannot be given more than once without risk of unpleasant reactions. It follows that anyone who has been given anti-tetanus serum should at once arrange to have a course of preventive inoculations.

Smallpox.

The table shown below gives the number of primary vaccinations done in 1958.

Age	Under 1	1 - 5	5 - 10	10 - 15	Over 15
Number of primary vaccinations	78	6	3	1	10

In addition to those shown above 7 re-vaccinations were carried out. Parents are well advised to have their children vaccinated early. Vaccination is still needed for travel to countries where the disease is prevalent, for the armed forces, and for some occupations in this country. Primary vaccination causes little upset to infants but can be troublesome to adults. As you see from the table, 10 adults had to undergo primary vaccination in 1958.

Poliomyelitis

Inoculations against poliomyelitis were offered to children between 6 months of age and 15 years. By 31st December about 64% of children eligible for inoculation had had 2 doses.

In September arrangements were made to extend the scheme to include a booster dose to be given not less than seven months after the second injection. Inoculations were also to be offered to those over 15 but under 26 years old. By the end of the year a number of booster injections had been given and a start made on the new age group of young adults.

Tuberculosis

This infectious disease has declined remarkably within the last few years. Man has two common sources of infection. Chest infections are acquired by inhaling infected droplets coughed up by others - often members of the same family.

The infection frequently takes place in the first years after leaving school and it is to protect young adults during these years that B.C.G. vaccine is offered to school leavers. This vaccine has been in use in other countries for many years and is known to give a good measure of protection.

During the autumn, tests were done on 91 boys and girls attending school in Terrington. 76 required B.C.G. vaccine.

65 boys and girls at school in Upwell were tested and 60 given B.C.G. vaccine.

The children not needing vaccination are those who have already acquired a tuberculous infection. In most cases of course it is a mild infection and causes no ill health. Some of these mild infections may be acquired from milk. Infection from milk is seen most frequently in children and it is probable that the two cases of abdominal tuberculosis notified during the year were milk borne infections. The spread of tuberculosis from cow to man is being checked by the formation of attested herds and by the heat treatment of milk. Under the Milk (Special designations) (Specified



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Area) (No. 2) Order of 1958 only heat treated milk may be sold unless derived from an attested herd. The effect of these measures will be to eliminate milk-borne tuberculosis in your area.

Heat treated milk is free from tubercle but it is not sterile and must still be boiled before being used in bottle feeds.

Housing

In his report for 1955 Dr. Hopkins made mention of the evil effects of bad housing. It is not easy to relate poor housing to ill health in any particular family as there are usually other factors operative. But surveys in Urban areas have shown some aspects of housing to be particularly important for health. I would say that overcrowding is the worst of the evils and is a serious handicap to children. Infants in overcrowded homes have a higher mortality. Home accidents are more common. Chronic infections of the nose and ears are found almost exclusively among the children of poor and overcrowded families. For older children some privacy is essential.

Second to overcrowding I think that damp, ill lit, dreary rooms are most harmful to health. Many asthmatics benefit from re-housing because the moulds which grow on damp walls produce spores to which they become sensitized.

These evils have always been with us. Only by careful supervision and constant effort can we suppress them. But there are other evils to be found in rural areas, evils exposed by the Sanitarians of the last century whose opinions are proven and accepted. I refer to the need for a pure and plentiful supply of water to every house and its corollary an efficient system of drainage.

Marshland Rural District is fortunate in that it has an efficient supply of piped water. But it is sadly lacking in a system of sewage disposal. This problem is made worse moreover by the abundant supply of water. A hundred years ago pails and privies were acceptable. Now they are not. So let us be rid of these relics. Let us make provision for existing and future development. No family can maintain the standards we expect today with the facilities of the nineteenth century.

I should like to thank the Chairman and Members of the Public Health Committee for the interest they have taken in the work being done by my department. I am grateful too for the assistance and support I have had from the Clerk, Public Health Inspector and Members of the Local Health Office Staff.

I am,

Your obedient Servant,

Medical Officer of Health.

SUMMARY OF VITAL STATISTICS

Area in acres.....56,652.
 Population in 1931.....15,350.
 Population in 1951 (Census).....16,567.
 Population in 1958 estimated mid year home population.....16,710.
 Number of separate dwellings occupied 1958..... 5,508.
 Rateable Value 1958.....£111,848
 Product of a penny rate 1958.....£436.5s.

LIVE BIRTHS 287 (Rate per 1,000) 17.5.

	<u>Total</u>	<u>Male</u>	<u>Female</u>	<u>Rate</u> <u>Marshland</u> <u>Rural</u>	<u>Rate</u> <u>England</u> <u>& Wales</u>	<u>Rate</u> <u>Admin.</u> <u>County</u>
Legitimate	272	149	123	17.5	16.4	17.2
Illegitimate	15	10	5			
	<u>287</u>	<u>159</u>	<u>128</u>			

STILL BIRTHS 5 (Rate per 1,000 Live and Still Births) 17.1

	<u>Total</u>	<u>Male</u>	<u>Female</u>	<u>Rate</u> <u>Marshland</u> <u>Rural</u>	<u>England</u> <u>&</u> <u>Wales</u>	<u>Admin.</u> <u>County.</u>
Legitimate	5	3	2	17.1	21.6	18.95.
Illegitimate	-	-	-			
	<u>5</u>	<u>3</u>	<u>2</u>			

TOTAL LIVE AND STILL BIRTHS 292

DEATHS (All Causes) 166

	<u>Total</u>	<u>Male</u>	<u>Female</u>	<u>Rate</u> <u>Marshland</u> <u>Rural</u>	<u>England</u> <u>&</u> <u>Wales</u>	<u>Admin.</u> <u>County.</u>
	166	92	74	11.2	11.7	9.74.

INFANT DEATHS 4(Rate per 1,000 Live Births) 13.9

	<u>Total</u>	<u>Male</u>	<u>Female</u>	<u>Rate</u> <u>Marshland</u> <u>Rural</u>	<u>England</u> <u>&</u> <u>Wales</u>	<u>Admin.</u> <u>County</u>
Legitimate	4	1	3	13.9	22.5	18.81
Illegitimate	-	-	-			
	<u>4</u>	<u>1</u>	<u>3</u>			

INFANT DEATHS	4	Rate	per 1,000 Live Births (Legitimate)	14.7.
"	"	Nil	" " " " " (Illegitimate)	NIL.
NEO NATAL (First four weeks)	Deaths 3.	Rate per 1,000 Live Births.		10.45.
ILLEGITIMATE Live Births	per cent of Total Live Births.			5.2%
MATERNAL DEATHS (Including Abortion)				NIL
MATERNAL MORTALITY	Rate per 1,000 Live and Still Births			NIL

1. GENERAL MEDICAL SERVICES

Norfolk Executive Council, 54, Prince of Wales Road,
Norwich. Clerk, R.J. Cobb, Esq.

(a) GENERAL

- (1) Norfolk and Norwich Hospital, Norwich.
- (11) West Norfolk and King's Lynn Hospital, King's Lynn.
- (111) Jenny Lind Hospital, Norwich.
- (1V) St. James' Hospital, King's Lynn. (For chronic sick).
- (V) North Cambs Hospital, Wisbech.
- (V1) The Howdale Home, Downham Market.

(b) MATERNITY

- (1) Bowthorpe Maternity Hospital, Wisbech.
- (11) West Norfolk and King's Lynn Hospital (Maternity Unit).
- (111) Adenbrookes Hospital, Cambridge.

(c) INFECTIOUS

- (1) Isolation Hospital, King's Lynn.
- (11) Peterborough Isolation Hospital.
- (111) Cambridge Isolation Hospital.

(d) SANATORIA

- (1) Kelling Sanatorium, Holt.

(e) MENTAL

- (1) St. Andrews Hospital, Norwich.
- (11) Hellesdon Hospital, Norwich.
- (111) Little Plumstead, Norwich.

2. MATERNITY SERVICES

- (a) District Nurses showing areas served (at times of compilation of this report).

Nurse Stevens, Terrington St. Clement and Terrington Marsh.

Nurse Cable, Walpole St. Andrew, Peter and Cross Keys area, Terrington St. John, Fen End, Trinity Road, Tilney St. Lawrence and Hay Green.

Nurses Stevens and Ellis, Tilney All Saints and Clenchwarton.

Nurse Criss, West Walton, Walsoken and Emneth.

Nurses O'Leary and Nolan, Upwell Outwell, Welney, Marshland St. James and Three Holes.

(b) MATERNITY

Beds in Regional Hospital Board Establishments.

- (1) Bowthorpe Maternity, Wisbech.

3. AMBULANCE AND HOSPITAL CAR SERVICE.

The hospital car service for the Marshland area is conducted by King's Lynn Ambulance Station and the Local Health Office, The Howdale, Downham Market.

The Marshland area is jointly served by the Downham Market and King's Lynn Ambulances.

Infectious Disease cases are conveyed by East Dereham, Wisbech and King's Lynn Ambulances.

4. RED CROSS AND ST. JOHN MEDICAL LOAN DEPOTS.

- {a} Terrington St. John - Mrs. D. Greer.
- {b} Walpole St. Peter - Mrs. G. Woods.
- {c} Terrington St. Clement - Mrs. S.M. Wilcox, The Lodge,
Terrington St. Clement.
- {d} Outwell - Mrs. Roper, Eason House, Outwell.
- {e} Three Holes - Mrs. D. Jerney, "Rcaysain", Three Holes.

5. COUNTY MEDICAL SERVICES

(a) INFANT WELFARE CENTRES

- (1) Terrington St. Clement - 3rd Tuesday, 2-4 p.m.

The Assistant County Medical Officer of Health attends at the above centre.

In addition Village Infant Welfare Centres are held at the following villages - Emneth, Marshland St. James, Tilney St. Lawrence, Walpole St. Peter, West Walton, Outwell and Three Holes. These centres are conducted by the Local Nurse/Midwives and Health Visitors, and are visited periodically by the Assistant County Medical Officer.

(b) SCHOOL MINOR AILMENT CLINICS

- (1) Terrington St. Clement Secondary School (every Tuesday during term).
- (2) Upwell Modern Secondary School - 1st, 3rd and 5th Thursdays during term.

The School Nurse attends at the above sessions and the Assistant Medical Officer at one session per month.

(c) HOME HELP SERVICE

The County Home Help scheme is doing excellent work and Home Helps are at present available for the following parishes and villages - Terrington St. John, Terrington St. Clement, Upwell, Outwell, Walpole St. Andrew and St. Peter, Tilney St. Lawrence, Clenchwarton, Islington, Emneth, Elm, Marshland St. James and Tilney All Saints.

6. VENEREAL DISEASE CLINIC

West Norfolk and King's Lynn Hospital.

MALES:- Tuesdays and Fridays - 5.30 p.m.

FEMALES AND CHILDREN:- Tuesdays and Wednesdays at 3.0 p.m..

7. DISINFECTION

- (1) Disinfection of premises is carried out by the Senior Public Health Inspector's staff.

8. LABORATORY SERVICE

- (a) Public Health Laboratory, Bowthorpe Road, Norwich.
Under the direction of Dr. L.M. Dowsett.
- (b) Public Analyst, Eric C. Wood, Ph.D., A.R.C.S., F.R.I.C.,
Clarence House, 6, Clarence Road, Norwich.

STATISTICAL TABLES, 1958.

Table No.1.

Causes of Death.

								Male	Female	Total
1.	Tuberculosis, respiratory	...	...	...	...			2	-	2
2.	Tuberculosis, other forms	...	...	...	...			-	-	-
3.	Syphilitic diseases	...	...	...	...			-	-	-
4.	Diphtheria	...	...	...	...			-	-	-
5.	Whooping Cough	...	...	...	...			-	-	-
6.	Meningococcal Infection	...	...	...	...			-	-	-
7.	Acute Poliomyelitis	...	...	...	...			-	-	-
8.	Measles...	...	...	...	...			-	-	-
9.	Other infective and parasitic diseases	...	...	...	...			-	-	-
10.	Malignant Neoplasm, stomach...	...	...	...	...			3	1	4
11.	Malignant Neoplasm, lung, bronchus	...	...	...	...			4	-	4
12.	Malignant Neoplasm, breast	...	...	...	...			-	2	2
13.	Malignant Neoplasm, uterus	...	...	...	...			-	2	2
14.	Other Malignant and Lymphatic Neoplasms	...	...	...	...			-	9	9
15.	Leukaemia	...	...	...	...			1	-	1
16.	Diabetes	...	...	...	...			1	1	2
17.	Vascular Lesions of nervous system	...	...	...	...			15	14	29
18.	Coronary disease, angina	...	...	...	...			12	5	17
19.	Hypertension with heart disease	...	...	...	...			-	1	1
20.	Other heart diseases	...	...	...	...			11	12	23
21.	Other circulatory diseases	...	...	...	...			9	6	15
22.	Influenza	...	...	...	...			3	1	4
23.	Pneumonia	...	...	...	...			6	2	8
24.	Bronchitis	...	...	...	...			4	5	9
25.	Other diseases of the respiratory system	...	...	...	...			2	-	2
26.	Ulcer of stomach and duodenum	...	...	...	...			-	1	1
27.	Gastritis, enteritis and diarrhoea	...	...	...	...			-	-	-
28.	Nephritis, Nephrosis	...	...	...	...			1	-	1
29.	Hyperplasia of prostate	...	...	...	...			2	-	2
30.	Pregnancy, childbirth and abortion	...	...	...	...			-	-	-
31.	Congenital malformation..	...	...	...	...			1	2	3
32.	Other defined and ill defined diseases	...	...	...	...			9	6	15
33.	Motor vehicle accidents..	...	...	...	...			4	1	5
34.	All other accidents	...	...	...	...			2	2	4
35.	Suicide...	...	...	...	...			-	1	1
36.	Homicide..	...	...	...	...			-	-	-
								92	74	166

NOTIFIABLE INFECTIOUS DISEASES

1958

Table No.2.

Notification in Age Groups

DISEASE	A G E S											65 & Over	Total
	Under 1	1-	2-	3-	4-	5-	10-	15-	20-	35-	45-		
Measles	-	-	-	1	-	2	-	-	-	-	-	-	3
Whooping Cough ...	-	2	2	3	-	4	-	-	-	-	-	-	14
Pneumonia	-	-	-	-	-	-	2	-	-	-	-	-	2
Infective Jaundice	-	-	-	-	-	-	-	-	-	-	-	-	-
Scarlet Fever	-	-	-	1	-	2	-	-	-	-	-	-	3
Ophthalmia Neonatorum	-	-	-	-	-	-	-	-	-	-	-	-	-
Erysipelas	-	-	-	-	-	-	1	-	-	-	1	-	2
Non-Paralytic Poliomyelitis ..	-	-	-	-	-	-	-	-	-	-	-	-	-
Paralytic Poliomyelitis ..	-	-	-	-	-	-	-	-	-	-	-	-	-
TOTALS	-	2	2	5	-	8	3	-	-	-	1	-	21

MONTHLY INCIDENCE OF NOTIFIABLE DISEASES

1958

Table No.3,

(Other than Tuberculosis)

DISEASE	Jan.	Feb.	Mar.	Apr.	May	Jun.	Jul.	Aug.	Sep.	Oct.	Nov.	Dec.	Total
Measles.....	-	-	-	1	-	1	-	-	1	-	-	-	3
Whooping Cough..	-	-	-	-	-	-	1	-	1	-	9	-	11
Pneumonia	-	-	-	-	-	1	-	1	-	-	-	-	2
Infective Jaundice.....	-	-	-	-	-	-	-	-	-	-	-	-	-
Scarlet Fever...	-	1	-	-	-	-	-	-	-	-	-	2	3
Ophthalmia Neonatorum....	-	-	-	-	-	-	-	-	-	-	-	-	-
Erysipelas.....	1	-	-	-	-	1	-	-	-	-	-	-	2
Non-Paralytic Poliomyelitis.	-	-	-	-	-	-	-	-	-	-	-	-	-
Paralytic Poliomyelitis.	-	-	-	-	-	-	-	-	-	-	-	-	-
TOTALS	1	1	-	1	-	3	1	1	2	-	9	2	21

NEW CASES AND DEATHS FROM TUBERCULOSIS - 1958

Table No.4.

Age in Years	NEW CASES				DEATHS				TOTAL
	Respiratory		Non- Respiratory		Respiratory		Non- Respiratory		
	Male	Fem.	Male	Fem.	Male	Fem.	Male	Fem.	
-1	-	-	-	-	-	-	-	-	-
-5	-	-	-	-	-	-	-	-	-
-15	-	-	-	-	-	-	-	-	-
-25	1	4	-	4	-	-	-	-	3
-35	-	-	-	-	1	-	-	-	1
-45	1	-	1	-	-	-	-	-	2
-55	1	-	-	-	-	-	-	-	1
-65	-	-	-	-	1	-	-	-	1
65 & over	1	-	-	-	-	-	-	-	1
Totals	4	4	1	4	2	-	-	-	9

REPORT OF THE SENIOR PUBLIC HEALTH INSPECTOR

. Chairman and Gentlemen,

I beg to submit my report for the year ending 31st December, 1958.

WATER SUPPLY

A further survey of the area resulted in the submission of a report to the Council of the areas in the district where properties exist with no piped water supply.

This survey revealed that there were 16 areas where new lengths of main were required. This report was submitted to the Wisbech & District Water Board for costing and resubmission to the Council for consideration in due course. It is hoped that more progress in this field will be made in 1959. Should the Council and the Minister approve these extra lengths of mains. I am of the opinion that it would be correct to say that the Marshland Rural District is one of the few rural areas in the country where over 98% of the inhabited houses have piped supply. This of course, is essential in an area where rainwater collected from roofs is the only other means of supply.

All these main supplies are controlled and maintained by the Wisbech & District Water Board and the Council's Public Health Department are grateful to the Engineer of the Board and his staff for their help and for the efficiency in the maintenance of a sufficient and pure supply of water for domestic purposes.

SEWAGE DISPOSAL

A remarkable increase in demand for the services of the Council's Cesspool Emptier was evident during the year. This was no doubt due to the very severe winter of 1957-58 and an abnormally wet spring and summer. Most of the methods of disposal to residential properties are of the septic tank system and it is difficult for these systems to work efficiently when the level of the subsoil water is high (as high as 1'0" below ground level in some areas). The one vehicle was so overworked that the Council considered and approved a request for another vehicle. The old vehicle to be used solely on the Sewage Disposal Plants of the Council Housing Estates and under the control of the Council's Housing Manager.

The problem of sewage disposal in Marshland is one which the Council will always have before them. In an area where a piped water supply is readily available the problem is aggravated as the bulk of sewage increases. The remedy is going to be both difficult and very costly, but as more and more houses are erected or improved to modern

standards I am sure that the time is not far distant when the problem will have to be tackled to ensure the continued health of the present and future generations.

I give below a comparative table of the work carried out over a period of years since 1952.

<u>Year</u>	<u>Cesspools</u>	<u>Privy Vaults</u>	<u>Sewage Disposal Plants (Council Housing Estates)</u>
1952	481	459	51
1953	685	394	54
1954	739	377	49
1955	771	368	45
1956	830	233	41
1957	955	383	53
1958	1305	343	43

This table indicates the constant rise in conversions of old privy vaults and pail closets to the water carriage system with cesspools.

RIVER POLLUTION PREVENTION ACTS

The district continued to be covered by the River Boards of the Great Ouse, and also by the Internal Drainage Boards. Pollution of these drains by sewage is still heavy and widespread and this is likely to increase as the subsoil water rises.

MOVEABLE DWELLINGS

Four new licences were issued under the Public Health Acts for moveable dwellings. Existing licences were extended for a period of a further twelve months where required.

One moveable dwelling in a verminous and filthy condition was removed into the district without permission.

With the assistance of the Local Constabulary and the Local Welfare Officer of the Norfolk County Council, the Department dealt with the occupants and the caravan was in such a state to warrant complete destruction.

The moveable dwellings in the district forming temporary accommodation were all inspected and found to be in a clean and tidy state.

Negotiations were commenced for the removal of a colony of undesirable moveable dwellings which remained camping in the district following seasonal agricultural work.

FRUIT PICKERS BUNKS AND SEASONAL AGRICULTURAL WORKERS

Once again there was a large influx of seasonal agricultural workers to the district in the early summer. There were four properly maintained camps for Student workers and these were inspected and found to be very satisfactory. Van dwellers were again in abundance and generally speaking, with a few exceptions, these were maintained in a fair condition.

INFESTATION BY PESTS

- | | |
|------------------------|--|
| (a) <u>Bed Bugs</u> | No reports of infestation were received or dealt with. |
| (b) <u>Fleas</u> | 5 cases were reported or found and disinfection was carried out by the Department.

One male person was removed for cleansing and was found to be unfit to care for himself. The property was subsequently closed. |
| (c) <u>Flies</u> | Owing to the inclement weather and low temperatures the fly population was not as high as in previous years.

Control of breeding on refuse tips was carried out by the Department. |
| (d) <u>Cockroaches</u> | One infestation was reported from a Bakehouse and Disinfection was carried out by the Department. |

PREVENTION OF DAMAGE BY PESTS ACTS

No rodent operator is employed by the Council. Very few infestations were reported or found during the year. This is probably due to the fact that the district possesses land which has such valuable agricultural farm holdings and it is in the best interests of the people to prevent infestations. I am confident that every owner of land and property in Marshland uses modern methods to be rid of rats which can cause so much damage to their livelihood.

Rodent control on Refuse Tips was carried out by the Council's employees and once again no heavy infestations were reported or found.

PUBLIC CLEANSING

The Refuse Collection Service by direct labour continued to operate fairly satisfactorily. The main difficulties have been at Clenchwarton where the increased number of properties are occupied mainly by people who have lived in towns. These people are of the opinion that a fortnightly kerbside collection is insufficient. Tipping facilities are still a great problem, but the opening of the new tip at War Bank, Clenchwarton helped in this area considerably.

I estimate that 95% of the properties, where refuse is collected, have provided a proper standard sanitary bin.

The Upwell and Outwell areas will also cause a problem for tipping space in about two years and I am still of the opinion that the possibility of controlled tipping in the disused Wisbech Canal should be of prime consideration.

FOOD AND FOOD PREMISES

43 visits were made to food premises during the year for inspection in conjunction with the Food Hygiene Regulations. One food shop was found to be in such a condition to warrant closing and steps were taken at the end of the year for this to be done.

Many improvements were made to food premises throughout the year and a very good general standard was maintained.

14 samples of ice-cream were taken from registered premises and submitted for analysis to the Public Health Laboratory. Two of the samples were placed in Grade III and these were re-sampled and placed in Category II at a later date. Ice-cream is not manufactured in the district and all the registered premises continued to retail the pre-packed ice-cream made by the large companies.

SLAUGHTERHOUSES - MEAT INSPECTION

At 31st December, 1958 there were ten private slaughterhouses licensed in the District and one Knackers Yard at Terrington St. John.

The premises were situated as follows:-

Upwell.....4 (1 did not slaughter during 1958.)

Outwell.....1

Walpole St. Peter.....2

Terrington St. John.....2

Tilney All Saints.....1 (Did not slaughter during 1958.)

Regular slaughtering was maintained at six of these slaughterhouses and occasional slaughtering at two. Post mortem inspection was carried out on all animals slaughtered. Having regard to the age of these slaughterhouses they are in good condition under the 1958 standard and a high standard of cleanliness was maintained. Condemned meat was disposed of by burial or sale to a knacker after being stained by your officers.

CONDEMNED MEAT

<u>Beasts</u>	-	Carcase Meat	784 lbs.
		Head and Offal	258 lbs.
<u>Pigs</u>	-	Carcase Meat	274 lbs.
		Head and Offal	435 lbs.
<u>Sheep</u>	-	Carcase Meat	Nil
		Head and Offal	Nil

CONDEMNED FOOD

<u>Cheese</u>	-	24 lbs.
<u>Tinned Fruit</u>	-	7½ lbs.
<u>Tinned Meat</u>	-	28 lbs.

MILK AND DAIRIES

The following licences were issued during the year:-

<u>Tuberculin Tested</u>	3 Dealer's Licences.
	1 Producer's Licence.
	8 Supplementary Licences.
<u>Pasteurised</u>	3 Dealers Licences.
	1 Producer's Licence.
	7 Supplementary Licences.
<u>Sterilised</u>	5 Dealer's Licences.

Milk samples were taken by the staff of the County Council.

OFFENSIVE TRADES

There is one licensed Knacker's Yard in the area at Terrington St. John and conditions were satisfactory.

The following table shows:-

Carcases and Offal inspected and condemned in whole or in part.

	Cattle Excluding Cows	Cows	Calves	Sheep & Lambs	Pigs	Horses.
No. Killed (if known)	374	-	-	735	1914	-
No. inspected	374	-	-	728	1914	-
(a)	-	-	-	-	-	-
(b)	32	-	-	-	81	-
(c)	8.55	-	-	-	4.23	-
(d)	1	-	-	-	1	-
(e)	20	-	-	-	44	-
(f)	5.4	-	-	-	2.3	-
(g)	1	-	-	-	-	-
(h)	-	-	-	-	-	-
(i)	-	-	-	-	-	-

Key to Table

- (a) All Diseases except Tuberculosis and Cysticerci - Whole carcasses condemned.
- (b) Carcasses of which some part or organ was condemned.
- (c) Percentage of the number inspected affected with disease other than tuberculosis and cysticerci.
- (d) Tuberculosis only: Whole carcasses condemned.
- (e) Carcasses of which some part or organ was condemned.
- (f) Percentage of the number inspected affected with T.B.
- (g) Cysticercosis - Carcasses of which some part or organ was condemned.
- (h) Carcasses submitted to treatment by refrigeration.
- (i) Generalised and totally condemned.

HOUSING

The attack on the Closing, Demolition and repair of sub-standard properties continued during the year and I thank the Council for their support in accepting my recommendations almost without exception. Many of the scars in the villages having been removed. Development by Private Enterprise went ahead and I given below the number of new dwellings completed.

Houses and Bungalows completed by the Council - 38

Houses and Bungalows completed by Private Enterprise - 72

232 Plans were submitted to the department during the year for approval under the Council's Building Byelaws.

ACTION BY THE COUNCIL UNDER THE HOUSING ACTS DURING 1958

Parish	Closing Orders made	Undertakings accepted	Demolition by Formal Action	Demolition by Informal Action
Clenchwarton.	3	-	-	-
Emneth.	-	1	3	-
Marshland St. James.	-	-	-	-
Outwell.	6	-	1	-
Terr. St. Clement.	6	4	-	-
Terr. St. John.	-	-	-	-
Tilney All Saints.	1	-	-	-
Tilney St. Lawrence.	-	-	-	-
Upwell.	1	-	-	-
Walpole St. Andrew.	2	1	-	-
Walpole St. Peter.	1	3	2	-
Walsoken.	-	-	4	1
West Walton.	-	3	-	1
TOTALS	20	12	10	2

CERTIFICATES OF DISREPAIR

Eleven applications were received during the year for Certificates of Disrepair and all were granted.

IMPROVEMENT GRANTS

Applications for Improvement Grants for the benefit of 35 properties were received by the Department during the year and 19 of these were completed.

HOUSING REPAIRS - INFORMAL ACTION

It was found necessary to serve four informal notices on owners of properties to do certain essential repairs and all of these notices were complied with. A further 12 properties were also dealt with by negotiation with landlords.

NUISANCES General Complaints - Routine Visits etc.

Summary of Visits - 1958

Water Supply.....	99
Drainage etc.....	430
Moveable Dwellings.....	110
Factories.....	5
Bakehouses.....	8
Refuse Collection and Disposal.....	104
Rodent Control.....	32
Petroleum.....	16
Housing.....	694
Slaughterhouses.....	591
Food Premises.....	43
Milk and Dairies.....	7
Infectious Disease.....	17
Miscellaneous.....	158

FACTORIES

Informal action was necessary in three cases reported by H.M. Inspectors. The number of Factories and Bakehouses registered in the District are as follows:-

Parish	No. with Mechanical Power	No. with no Mechanical Power
Clenchwarton	3	-
Emneth	13	2
Marshland St. James.	1	1
Outwell	4	-
Terr. St. Clement.	9	-
Terr. St. John.	6	1
Tilney St. Lawrence.	4	-
Upwell.	7	2
Walpole St. Andrew.	6	1
Walpole St. Peter.	1	3
West Walton.	2	-
TOTALS	56	10

Finally may I record my thanks to the Council for their co-operation during the year and to the Clerk and other members of the staff who have assisted the work of the Department in many ways.

I have the honour to be,

Your obedient Servant,

B. V. Braybrook.

Senior Public Health Inspector.

